

7-19-04 1636 JFW

I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EV 378818966 US, in an envelope addressed to: MS Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: July 16, 2004

Signature:

*J. M. DiGiorgio*  
(Jeanne M. DiGiorgio)

Docket No.: MTN-029US  
(PATENT)

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re Patent Application of:  
Matzuk *et al.*

Application No.: 10/018,638

Confirmation No.: 5196

Filed: July 15, 2002

Art Unit: 1636

For: GROWTH DIFFERENTIATION FACTOR-9  
REGULATORY SEQUENCES AND USES  
THEREFOR

Examiner: Qian, Celine X.

**AMENDMENT AND RESPONSE TO RESTRICTION REQUIREMENT**

MS Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

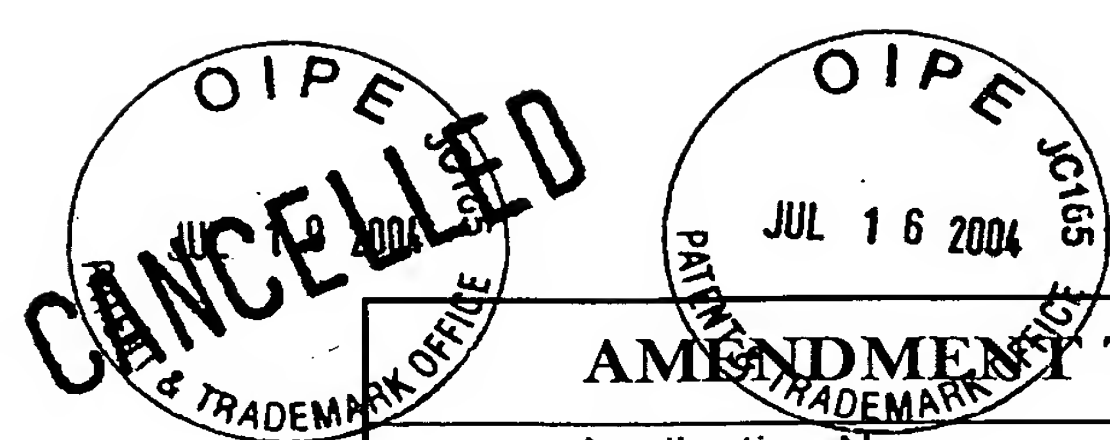
Dear Sir:

This communication is in response to the restriction requirement set forth in the Office Action mailed June 16, 2004 (Paper No. 0604). Applicants believe that no fee is due with this response. However, if a fee is due, please charge our Deposit Account No. 12-0080, under Order No. MTN-029US from which the undersigned is authorized to draw.

Please amend the above identified application as follows.

**Amendments to the claims** are reflected in the listing of claims which begins at page 2 of this communication.

**Remarks/Arguments** begin at page 5 of this communication.



## AMENDMENT TRANSMITTAL LETTER

Docket No.  
MTN-029USApplication No.  
10/018638-Conf. #5196Filing Date  
July 15, 2002Examiner  
Qian, Celine X.Art Unit  
1636Applicant(s): Martin Mathew MATZUK *et al.*Invention: GROWTH DIFFERENTIATION FACTOR-9 REGULATORY SEQUENCES AND USES  
THEREFOR

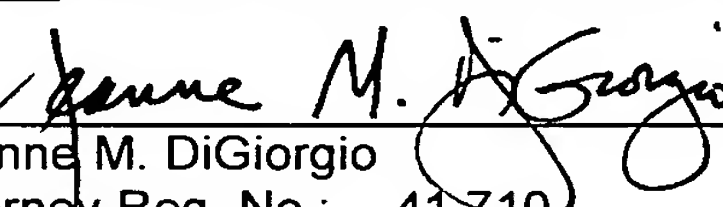
## TO THE COMMISSIONER FOR PATENTS

Transmitted herewith is an amendment in the above-identified application.

The fee has been calculated and is transmitted as shown below.

CLAIMS AS AMENDED					
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
Total Claims	28	- 31 =		x	0.00
Independent Claims	6	- 7 =		x	0.00
Multiple Dependent Claims (check if applicable)				<input checked="" type="checkbox"/>	0.00
Other fee (please specify):					
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:					0.00

☐ Large Entity☒ Small Entity☒ No additional fee is required for this amendment.☐ Please charge Deposit Account No. \_\_\_\_\_ in the amount of \$ \_\_\_\_\_.  
A duplicate copy of this sheet is enclosed.☐ A check in the amount of \$ \_\_\_\_\_ to cover the filing fee is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.☒ The Director is hereby authorized to charge and credit Deposit Account No. 12-0080  
as described below. A duplicate copy of this sheet is enclosed.☒ Credit any overpayment.☒ Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.

  
Jeanne M. DiGiorgio  
Attorney Reg. No.: 41,710

Dated: July 16, 2004

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Signature:  (Jeanne M. DiGiorgio)